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APPLICATION NO.	FILING DATE	FILING DATE			TOR		ATTO	RNEY DOCKET NO.	CONFIRMATION NO.		
10/575,599	04/13/2006			Nigel Hall		05579-00354-US		1576	5		
TITLE OF INVENTION:	DISPERSE AZO DYE	STUFFS		_							
APPLN. TYPE	SMALL ENTITY	ISSI	JE FEE DUE	PUBLICATION FEE I	DUE	PREV. PAID ISSUI	e fee	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	ИО		\$1440	\$300		\$0		\$1740	03/21/2008		
EXAMINER		ART UNIT		CLASS-SUBCLASS	S						
POWERS, FIONA			1626	534-753000							
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				or agents OR, alte (2) the name of a registered attorner 2 registered naten	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Connelly Bove Lodge + Hutz/LLP 3						
3. ASSIGNEE NAME AN PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIG Dysta Please check the appropri	ess an assignee is ident in 37 CFR 3.11. Comp NEE	ified bel pletion o	ow, no assignee f this form is NO	data will appear on T a substitute for filin (B) RESIDENCE: (the paig an CITY	atent. If an assign assignment. Tand STATE OR C	TAUOX	ry) /	ocument has been filed		
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	SMALL ENTITY stat	us. See 3	37 CFR 1.27.					TITY status. See 37 C			
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Authorized Signature	Olahleya (J O	mmel	1		2	-/20	0108			
Typed or printed name		I.	Spezz	ner		Registration l		35,64			
This collection of informa an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, V Alexandria, Virginia 223	13-1430.									cess) , and plete P.O. 1450,	